

Application for Waiver From
Requirement of Securing a
One or Two Family Certificate of Occupancy

PROPERTY ADDRESS:

NUMBER	STREET	ZIP CODE
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PROPERTY OWNER'S NAME:

LAST	FIRST	MIDDLE I.
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PROPERTY OWNER'S TELEPHONE NUMBER: _____

WORK	HOME
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I, the owner of the dwelling listed above, hereby swear that I qualify for the waiver from the requirement of securing a **Certificate of Occupancy** for the dwelling listed above because:

☐ (I); ☐ (My Spouse); ☐ (My Child); ☐ (My Sibling); or ☐ (My Parent) currently reside at the dwelling. I have attached a postmarked utility bill (e.g. RG&E, telephone, cable, etc.) addressed to me or my relative at the above referenced dwelling. I further attest to the following applicable checklist requirements:

(Required to be completed for all Two Family Dwellings)

- ☐ Both units are currently occupied
- ☐ The additional unit has been vacant since _____

(Required to be completed for both One & Two Family Dwellings)

- ☐ The Unit(s) have working smoke Alarms in the following locations; in each sleeping room, in the hallway outside each sleeping area, and on every story within the dwelling including basements and cellars but not uninhabitable attics
- ☐ The Unit(s) have a carbon monoxide alarm in the hallway within 15 feet of the sleeping area on the lowest level where there is a sleeping area

Date: _____

Signature

Please return completed form to:
City of Rochester
Inspection & compliance bureau
City Hall - 30 church Street
Room 028 B
Rochester, NY 14614
Phone: (585)428-6520
Fax: (585)428-6287

Printed name of Signature